



Complications of Spinal Cord Injury: Orthostatic Hypotension

What is it?

Orthostatic hypotension is a drop in blood pressure when a person raises to a sitting position from lying down. Because the blood pools in the legs, there is less blood to flow to the brain and the person may feel faint or dizzy.

Why does it happen?

A spinal cord injury can cause a loss of nervous system control, which works to keep blood pressure stable. Orthostatic hypotension can then occur. It is common with cervical (levels C1-8) and high thoracic (levels T 1-6) spinal cord lesions. It is most common right after the injury and in the first few weeks of rehabilitation.

How long will it last?

Most often, orthostatic hypotension will resolve in a matter of weeks, as the body gets used to the change in the nervous system. It might come back only if you stay in bed for long periods of time. A few people may have orthostatic hypotension for a longer time and may need medication to treat it.

How to prevent orthostatic hypotension

- Get up slowly. If possible, slowly raise the head of the bed and sit up in bed for a few minutes before you transfer to your wheelchair.
- Stay active and avoid staying in bed for any length of time, if you do not need to.
- A reclining wheelchair that has elevating foot rests and slowly rises to sitting position can help.
- Elastic stockings, ace wraps, and abdominal binders help lessen the blood pressure drop when you sit, if you apply them **before** you raise to a sitting position.

Signs of orthostatic hypotension

- Feeling lightheaded or dizzy (this is the most common sign)
- Loss of vision or seeing dots before your eyes
- Loss of hearing or roaring in your ears
- Fainting
- Burning or tingling in lower legs
- Fast heartbeat

What to do if you have orthostatic hypotension

- If you are sitting on the edge of the bed and begin to feel dizzy, lay down on the bed. Make sure your binder is tight enough. When the dizziness has passed, try to sit up on the edge of the bed. Wait to make sure you do not get dizzy again before you transfer to your wheelchair.
- If you are in the wheelchair and begin to feel dizzy, recline the back (if you have a recliner wheelchair) or have someone tip you back. You may need to have your legs raised over your head, to raise your blood pressure. Once the dizziness goes away, slowly sit up again.
- You may need to do this a few times until your body becomes used to being upright.
- If it continues for a period of time, return to bed.

Do not try to fight the dizziness. It is not a matter of will power. If you ignore the early signs, you might faint and could injure yourself if you fall because of fainting.

If you have gone through a period of time without getting dizzy and then find yourself getting dizzy every time you get up, this might be a sign that you have an infection or some other medical problem. Call your doctor.